



APPLICATION
FOR
CONCESSIONS
& EXHIBITS

*(Please print legibly or type the front and back of this application form.
We regret that incomplete or illegible application forms will not be considered.)*

DATE OF APPLICATION _____

NAME OF BUSINESS: _____

NAME OF OWNER: _____

(Name that should appear on your contract, if approved for space)

NAME OF MANAGER: _____

(Name of person who will run your operation at the ISF)

PERMANENT MAILING ADDRESS: _____

CITY / STATE / ZIP CODE: _____

BUSINESS PHONE: (____) _____ **HOME:** (____) _____

CELL PHONE: (____) _____ **FAX:** (____) _____

E-MAIL ADDRESS: _____

INDIANA RETAIL MERCHANT CERTIFICATE # _____

(PROVIDE US A COPY)

TYPE AND SIZE OF SPACE DESIRED:

INSIDE SPACE _____ **10' x 10'** _____ **20'x 10'** _____ **20' x 20'**

OUTSIDE SPACE _____ **HOW MANY SERVING SIDES?** _____

MINIMUM: FRONTAGE _____ **X DEPTH** _____

MAXIMUM: FRONTAGE _____ **X DEPTH** _____

**(MINIMUM IS 15' FRONTAGE. REQUESTED FOOTAGE MUST INCLUDE ALL AWNINGS,
TIE-DOWNS. OVERHANGS, TRAILER HITCH, SERVICE/PREP AREA, ETC)**

(continued)

WE ANTICIPATE: (Check those which apply)

Making cash sales _____ Taking deposit with orders _____

Order taking only _____ Display of product/service only _____

Other (Please specify) _____

Do you plan to hold a contest, registration, award a prize or have a give-away? (____) Yes (____) No

If yes, explain: _____

Do you plan to present a demonstration? (____) Yes (____) No

Do you plan to use a microphone/pitch? (____) Yes (____) No

If yes, the sound must be kept low enough so it does not interfere with surrounding booths.

HAVE YOU PREVIOUSLY APPLIED FOR OR OCCUPIED EXHIBIT/CONCESSION SPACE AT THE INDIANA STATE FAIR? (____) YES (____) NO. IF YES, WHAT YEAR(S) _____

PHOTO/SCHEMATIC OF EXHIBIT:

You MUST enclose a clear color photograph or detailed schematic drawing of your exhibit /booth and any literature pertaining to your product(s) or service(s).

PLEASE NOTE:

- ***AN APPLICATION FEE IS NOT REQUIRED FOR 2007 APPLICATIONS. INCLUDE*** with application, ***your photos and brochures.*** This is only an application; it does not guarantee a space will be offered.
- ISF reserves the right to accept or reject any applicant based on the uniqueness and/or quality of products sold, or services offered, appearance of your space/booth, and references from other fairs/shows/bank or business at which you participate with.
- **All food and beverage concessionaires must abide by the Indiana State Department Board of Health’s Rules and Regulations!**

“I CERTIFY THAT THE INFORMATION STATED ON THIS APPLICATION FORM IS COMPLETE AND TRUE, TO THE BEST OF MY KNOWLEDGE, AND UNDERSTAND THAT THIS IS AN APPLICATION FOR CONCESSION/EXHIBIT SPACE ONLY, NOT GUARANTEE OF SPACE OR CONTRACT FOR SAME WITH THE INDIANA STATE FAIR.”

(Signature of owner as stated on front)

DATE: _____

Mail Application to: INDIANA STATE FAIR ATTN: CONCESSION OFFICE
1202 E 38TH STREET., INDIANAPOLIS, IN 46205